

148-1

INVOICE CHECK LIST

MEULANA Subproject

As Date of Original Authorization	Period Covered	Time Extended To	Allotment Number	Amount of Obligation
24 Oct. '63	1 year		4125-1390-3902	5,000.00

Additional Authorizations	Period Covered	Time Extended To	Allotment Number	Amount of Obligation

Invoice Number	Date	Amount	Balance
Authorization #1	24 Oct. '63	5,000.00	5,000.00
Invoice # 1	27 Nov. '63	500.00	4,500.00
Invoice # 2	20 Dec '63	750.00	3,750.00
Invoice # 3	23 Jan '64	1,250.00	2,500.00
Invoice # 4	26 Feb '64	250.00	2,250.00
Invoice # 5	27 Mar '64	250.00	2,000.00
# 6	11 Apr '64	500.00	1,500.00
# 7	11 May '64	500.00	1,000.00
# 8	11 Jul '64	500.00	500.00
Invoice # 9	13 Oct '64	500.00	0

148-2

#148

RECEIPT

Receipt is hereby acknowledged of Treasurer's Check
No. L101412, dated October 30th, 1964, drawn on the

E [REDACTED] of the [REDACTED]

payable to D [REDACTED] in the amount of
\$500.00.

NAME [REDACTED]

DATE

9 Nov. 1964

1982

[Redacted]

CONSULTANT
PHARMACOLOGY AND TOXICOLOGY

15 October 1964

To [Redacted]

B

*Discontinue
procurement 12 Sep 64,
prime amount.*

For consultation and special services rendered, May and
June 1964

\$500.00

[Redacted]

I certify that services or materials have been
satisfactorily received and the expenditures
were incurred on official business.

[Redacted]

Date: OCT 23 64

A

Invoice #9

(When Filled In)

VOUCHER NO. (Finance Use Only)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

NAME OF CLAIMANT

MKULTRA Subproject #143

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

AMOUNT

\$500.00

Payment to Dr. [redacted] or Invoice No. 9, professional services rendered MKULTRA Subproject no. 143, per para. IV-D of MKULTRA Fiscal Annex. I certify that, to the best of my knowledge and belief, the amount shown has been disbursed for Agency-authorized activities and services or materials have been received. The document upon which this statement is based is maintained in the files of TSD for security reasons and will be made available to the certifying officer at his request.

Please forward check to [redacted] through [redacted]

I authorize my agent, whose signature appears below, to receive currency amounting to [redacted] of official funds on my behalf and acknowledge receipt of such funds and my responsibility therefor, when paid to my agent.

I CERTIFY THAT THE DISBURSEMENTS ITEMIZED ABOVE WERE NECESSARILY MADE BY ME IN THE CONDUCT OF OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; THAT I HAVE NOT BEEN, NOR WILL I BE, REIMBURSED THEREFOR FROM ANY OTHER SOURCE, AND THAT THIS CLAIM AND ATTACHMENTS ARE TRUE AND CORRECT.

SIGNATURE OF PAYEE

DATE 13 Oct 64

SIGNATURE OF AGENT

DATE 13 Oct 1964

APPROVED

SIGNATURE OF APPROVING OFFICER

SIDNEY GOTTLIEB, DC/TSD

CERTIFIED FOR PAYMENT OR CREDIT

SIGNATURE OF CERTIFYING OFFICER

I CERTIFY FUNDS ARE AVAILABLE

OBLIGATION REFERENCE NO. CHARGE COST ACCT. NO. 299 4125-1390-3901

DATE AUTHORIZED SIGNATURE

RECEIPT FOR FUNDS RECEIVED

PAYMENT RECEIVED IN THE AMOUNT OF \$

DATE SIGNATURE OF PAYEE AGENT

SPACE BELOW FOR EXCLUSIVE USE OF CONFIDENTIAL FUNDS DIVISION

VOUCHER NO. 7-12

PREPARED BY

REVIEWED BY

DESCRIPTION-ALL OTHER ACCOUNTS 13-33

STATION EXPEND FUNDS 40-42

PER. ADVANCE CODE 45-46

PUR. ORDER NO. 13-27

DESCRIPTION-ADVANCE ACCOUNTS 13-27

STATION EXPEND FUNDS 40-42

PER. ADVANCE CODE 45-46

PUR. ORDER NO. 13-27

DESCRIPTION-ADVANCE ACCOUNTS 13-27

STATION EXPEND FUNDS 40-42

PER. ADVANCE CODE 45-46

PUR. ORDER NO. 13-27

DESCRIPTION-ADVANCE ACCOUNTS 13-27

STATION EXPEND FUNDS 40-42

PER. ADVANCE CODE 45-46

PUR. ORDER NO. 13-27

DESCRIPTION-ADVANCE ACCOUNTS 13-27

CHECK # 1011 IN THE AMOUNT OF \$500.00 RECEIVED. A

130 October 1964

TOTALS

148-2

RECEIPT

148-3 #1-18

Receipt is hereby acknowledged of Treasurer's Check
No. 208818, dated August 12, 1964, drawn on the
[REDACTED]
payable to Dr. [REDACTED] in the amount of
\$500.00.

E

NAME: C [REDACTED]

DATE: 18 Aug. 1964

CONSULTANT
PHARMACOLOGY AND TOXICOLOGY

11 July 1964

To

[REDACTED] B

For services rendered, June 1964

\$500.00

I certify that services or materials have been
satisfactorily received and the expenditures
were incurred on official business.

[REDACTED]

A

Date: [REDACTED]

Invoice # 8

148-3

[Redacted] C

CONSULTANT
PHARMACOLOGY AND TOXICOLOGY

11 July 1964

[Redacted] B

Gentlemen:

Current work in this laboratory by Dr. [Redacted] C and associates. The effects of a synthetic dimethyl heptyl analogue of the active ingredient of marihuana are being compared with those of thiopental on EEG arousal in acute cat preparations, EEG and behavioral arousal in chronic cat preparations, and on the transfer of sensory impulses through the brain stem reticular formation. This work is aimed at elucidating the mechanism of the CNS depression caused by the marihuana analogue.

Yours very truly,

[Redacted] C

(When Filled In)

VOUCHER NO. (Finance use only)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

NAME OF CLAIMANT
MKULTRA Sub #148

CHARGE TO ALLOTMENT OR PROJECT
529-0007 425-1390-3901

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

AMOUNT

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

\$500.00

Payment to Dr. [redacted] Invoice No. 9, professional services rendered MKULTRA Subproject No. 148, per para. IV-D of MKULTRA Fiscal Annex. I certify that to the best of my knowledge and belief, the amount shown has been disbursed for Agency-authorized activities and services or materials have been received. The document upon which this statement is based is maintained in the files of ISD for security reasons and will be made available to the certifying officer at his request.

Please forward check to [redacted] through [redacted]

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT, THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

SIGNATURE OF PAYEE

APPROVED

SIGNATURE OF APPROVING OFFICER

DATE

DATE

DATE

DATE

[redacted]

31 Jul 64

SIDNEY COTTLEB, DC/TSE

21 Jul 1964

PAYMENT RECEIVED IN THE AMOUNT OF \$

CERTIFIED FOR PAYMENT OR CREDIT

SIGNATURE OF AUTHORIZING OFFICER

SIGNATURE OF PAYEE

SIGNATURE OF APPROVING OFFICER

SIGNATURE OF AUTHORIZING OFFICER

SIGNATURE OF PAYEE

SIGNATURE OF APPROVING OFFICER

SIGNATURE OF AUTHORIZING OFFICER

4 AUG 1964

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

VOUCHER NO. 7-12

REVIEWED BY

DESCRIPTION-ALL OTHER ACCOUNTS 13-33
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ADVANCE ACCOUNTS 13-27
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ALL OTHER ACCOUNTS 13-33
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ADVANCE ACCOUNTS 13-27
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ALL OTHER ACCOUNTS 13-33
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ADVANCE ACCOUNTS 13-27
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ALL OTHER ACCOUNTS 13-33
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ADVANCE ACCOUNTS 13-27
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ALL OTHER ACCOUNTS 13-33
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ADVANCE ACCOUNTS 13-27
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ALL OTHER ACCOUNTS 13-33
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ADVANCE ACCOUNTS 13-27
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ALL OTHER ACCOUNTS 13-33
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

DESCRIPTION-ADVANCE ACCOUNTS 13-27
PUR. ORDER NO. 4125-1390-3901
STATION CODE 529-0007
DIV PROJECT NO. 1323

TOTALS

1487A # 148

RECEIPTS

Receipt is hereby acknowledged of Treasurer's Checks
Nos. L101291 and L101292, dated 10 June 1964, drawn on
the [REDACTED] of the [REDACTED]
payable to [REDACTED] in the amount of \$500 each.

C

NAME [REDACTED]

DATE

25 June 1964

(When Filled In)

VOUCHER NO. (Finance use only)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

NAME OF CLAIMANT: MEMORANDUM, BUILDING NO. #140

CHARGE TO ALLOTMENT OR PROJECT: 4175-1000-3000

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS	AMOUNT
<p>Payment to Dr. [redacted] of Invoice No. 7, for professional services rendered MEMORANDUM Sub #140, per para. 15-0 of MEMORANDUM Fiscal Annex. I certify that to the best of my knowledge and belief, the amount shown has been disbursed for Agency-Authorized activities and services or materials have been received. The document upon which this statement is based is maintain in the files of TSD for security reasons and will be made available to the certifying officer at his request.</p> <p>Please forward check to [redacted] no later than 3 June 1954.</p>	\$500.00

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT, THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

I CERTIFY FUNDS ARE AVAILABLE

OBLIGATION REFERENCE NO.	CHARGE ALLOTMENT NO.	DATE	SIGNATURE OF APPROVING OFFICER	DATE	SIGNATURE OF PAYEE
	4175-1000-3000		[redacted]	07 MAY 54	[redacted]
DATE	SIGNATURE OF AUTHORIZING OFFICER	DATE	CERTIFIED FOR PAYMENT OR CREDIT	DATE	SIGNATURE OF RECIPIENT
9 JUN 1954					

PAYMENT RECEIVED IN THE AMOUNT OF \$

VOUCHER NO. 7-12

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

DESCRIPTION-ADVANCE ACCOUNTS 13-27	PUR. ORDER NO.	7A NO.	STATION	94-39	40-42	43	45-46	47-52	53	54-57	58-57	68-70	71-80
				EXPEND. CODE	FUNDS CODE	PER. LIO. CODE	PAY LIO. CODE	REF. NO.	GENERAL LEDGER ACCOUNT NO.	ALLOT. OR COST ACCT. NO.	DUE DATE	DEBIT	CREDIT
...
TOTALS													

148-7a

148

[Redacted]

C

CONSULTANT
PHARMACOLOGY AND TOXICOLOGY

11 May 1964

To:

[Redacted]

15

For services rendered, May 1964

\$500.00

[Redacted]

C

I certify that services or materials have been
satisfactorily received and the expenditures
were incurred on official business.

[Redacted]

A

Date:

7

148-5 ¹⁴⁸ *Finaw*

[REDACTED]

CONSULTANT
PHARMACOLOGY AND TOXICOLOGY

C

11 April 1964

To:

[REDACTED]

B

For services rendered, April 1964

\$500.00

C

[REDACTED]

I have examined and approved the submitted
expenditures.

[REDACTED]

TSD/Biological Branch

A

Finaw #6

148-6
31 March 1964

PROJECT CRYPTO : MKULTRA 148
INVESTIGATOR : Dr. [REDACTED]
RENEWAL DATE : October 1964

1. This project provides for the utilization of the professional services of Dr. [REDACTED]. Since the initiation of this project he has proved to be a reliable source of information on the pharmacological and physiological information of special chemical compounds of current interest in the [REDACTED] program. The information provided has been utilized in maintaining and advancing our knowledgeability of unpublished data and information which permits us a better basic understanding of the sites of action of materials significant in influencing animal and human behavior and guides us in selection of material and experimental techniques.

2. He has reported on detailed experiments he was using to demonstrate that high and low spinal sections blocked the action of a dimethyl heptyl substituted tetrahydrocannabinol on the polysynaptic flexion reflex whereas the mid brain section did not. The site of action is indicated in the lower brain stem.

3. The consistent depressant action on these reflexes is probably due to a summation of possible depressant actions locally on the reflex system and at points in the motor facilitory systems. It is hoped that work in this area will eventually identify the mechanism responsible for the ataxia produced by high doses of the active principle of marijuana.

4. The long latent period experienced in the use of C-9 may be attributed to the mineral or vegetable oil vehicle which is used frequently in oral dosage forms.

5. Attention has been called to the diethylamide of 2-methoxy-4-allyl phenoxy acetic acid which possesses a narcotic and powerful analeptic respiratory action. It

148-6

causes stronger respiratory stimulation than that obtained with most anaesthetics.

6. A report by [redacted] of the [redacted] was given to Dr. [redacted] for review and criticism. This report is of considerable interest [redacted] since it describes interactions between pesticidal chemicals and psychotherapeutic compounds. The pesticidal chemicals are of the acetylcholinesterase inhibitor class, a class which includes our CW organs phosphate materials. Pentobarbital and 1-Naphtyl N-methyl carbamate ("Sevin") (a reversible anticholinesterase material) gave directly additive responses. Chlorpromazine greatly augmented the response to "Sevin". This was not related to changes in the brain cholinesterase activity. Pilocarpine which does not block cholinesterase increased and prolonged the anticholinesterase action of Sevin. This pattern offers interesting possibilities of interaction among materials of more direct interest to [redacted]

7. Dr. [redacted] is summarizing the latest information and the state of the art in setting the stage for and triggering epileptiform seizures in mammals. He will maintain his contacts in the various domestic and overseas laboratories with a special attention within security on those phenomena of interest to [redacted]

8. Dr. [redacted] will continue to provide professional services, review and set up protocols for critical pre-clinical animal testing, will seek out sources of information and provide data available on direct request of [redacted] or whenever data or information is revealed to him which he believes will be of interest to [redacted]

C

1487

RECEIPT

Ce
Receipt is hereby acknowledged of Treasurer's
Check No. 205936, dated April 9, 1964, drawn on the
payable to [REDACTED] in the amount of \$250.00.

C
NAME [REDACTED]

DATE 18 April 1964

(When Purchased In)

VOUCHER NO. (Finance use only)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

NAME OF CLAIMANT
CHARGE TO ALLOTMENT OR PROJECT

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

PAID TO DR. [REDACTED] FOR INVOICE # 5 FOR PROFESSIONAL SERVICES FORCED...
AMOUNT 250.00

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT. THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

APPROVED
SIGNATURE OF APPROVING OFFICER
DATE
SIGNATURE OF PAYEE

DATE
SIGNATURE OF AUTHORIZING OFFICER
DATE
SIGNATURE OF CERTIFYING OFFICER
DATE
SIGNATURE OF RECIPIENT

PAYMENT RECEIVED IN THE AMOUNT OF \$

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

Table with columns: 13-27, 28-33, 34-39, 40-42, 43, 45-46, 47-52, 54-57, 59-67, 68-70, 71-80. Includes rows for DESCRIPTION-ADVANCE ACCOUNTS and various ledger/account numbers.

TOTALS

CONSULTANT
PHARMACOLOGY AND TOXICOLOGY

1487

16 March 1964

To:

For services rendered, March 1964

\$250.00

I certify that services or materials
satisfactorily received and the expenditures
were incurred on official business.

Date: 22 March 1964

INV 5

CONSULTANT
PHARMACOLOGY AND TOXICOLOGY

13 February 1964

To:

For services rendered, February 1964

\$250.00

I certify that services or materials have been
satisfactorily received and the expenditures
were incurred on official business.

Received

17 March 1964

INV 4

Date:

198-8

RECEIPT

Receipt is hereby ^eacknowledged of Treasurer's
Check No. L101139, dated March 11, 1964, drawn
on the [REDACTED]
payable to Dr. [REDACTED] in
the amount of \$250.00

C
NAME [REDACTED]

Date 17 March 1964

INV 4

(When Filled In)

VOUCHER NO. (Finance use only)

NAME OF CLAIMANT

CHARGE TO ALLOTMENT OR PROJECT

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

AMOUNT

FOR INVING # 4 FOR PROFESSIONAL SERVICES RECEIVED FROM THE MULTIA FISCAL AGENCY. I CERTIFY THAT THE AMOUNT SHOWN HAS BEEN RECEIVED. THE AGENCY ADVISED ACTIVITIES, AND SERVICES OF MATERIALS HAVE BEEN RECEIVED. THE ACCOUNTS UPON WHICH THIS STATEMENT IS BASED ARE MAINTAINED IN THE FILES OF THE SECURITY PERSONNEL, AND WILL BE MADE AVAILABLE TO THE CERTIFYING OFFICER AT HIS REQUEST.

299

10 MAR 1964

250.00

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT, THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

OBLIGATION REFERENCE NO.		CHARGE ALLOTMENT NO.	DATE	SIGNATURE OF APPROVING OFFICER	DATE	SIGNATURE OF PAYEE
299		612-220-000	3/8/64	[Signature]		[Signature]
DATE	SIGNATURE OF AUTHORIZING OFFICER	CERTIFIED FOR PAYMENT OR CREDIT	DATE	SIGNATURE OF CERTIFYING OFFICER	DATE	SIGNATURE OF RECIPIENT
10 MAR 1964	[Signature]			[Signature]		[Signature]

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

VOUCHER NO. 7-12

REVIEWED BY

DESCRIPTION - ALL OTHER ACCOUNTS	13-33	34-39	STATION CODE	40-42	EXPEND CODE	43	FUNDS	45-46	PAY PER. LIQ. CODE	47-52	OBLIG. REF. NO.	53	54-57	GENERAL LEDGER ACCOUNT NO.	58-67	ALLOT. OR COST ACCT. NO.	68-70	DUE DATE	71-80	AMOUNT	
DESCRIPTION - ADVANCE ACCOUNTS	13-27	PUR. ORDER NO.	52-53	PROF. NO.	52-53	PROJECT NO.	52-53	52-53	52-53	52-53	52-53	52-53	52-53	52-53	52-53	52-53	52-53	52-53	52-53	52-53	52-53
																			TOTALS		

148-9

[Redacted]

CONSULTANT
PHARMACOLOGY AND TOXICOLOGY

C

11 January 1964

To: [Redacted]

B

For services rendered, January 1964

\$1250.00

Recd. 13 Feb. 64

[Redacted]

C

I certify that services rendered have been satisfactorily received and the expenditures were incurred on official business.

C

[Redacted]

[Redacted]

A

Date

148-9

RECEIPT

Receipt is hereby acknowledged of Treasurer's
Check No. 0128236, dated February 3, 1964, drawn
on the [REDACTED] payable to Dr. [REDACTED]
in the amount of \$1,250.00.

NAME [REDACTED]

Date 13 Feb. 64

(When Filled In)

VOUCHER NO. (Finance use only)

NAME OF CLAIMANT

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

CHARGE TO ALLOTMENT OR PROJECT

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

AMOUNT

FOR THE MONTH OF FEBRUARY 1964. I CERTIFY THAT THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

1,750.00

I CERTIFY FUNDS ARE AVAILABLE

OBLIGATION REFERENCE NO. CHARGE ALLOTMENT NO. DATE SIGNATURE OF APPROVING OFFICER

SIGNATURE OF PAYEE

DATE

PAYMENT RECEIVED IN THE AMOUNT OF \$

DATE

SIGNATURE OF RECIPIENT

DATE

SIGNATURE OF CERTIFYING OFFICER

DATE

CERTIFIED FOR PAYMENT OR CREDIT

DATE

SIGNATURE OF CERTIFYING OFFICER

DATE

CERTIFIED FOR PAYMENT OR CREDIT

DATE

SIGNATURE OF CERTIFYING OFFICER

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SIGNATURE OF CERTIFYING OFFICER

DATE

CERTIFIED FOR PAYMENT OR CREDIT

DATE

SIGNATURE OF CERTIFYING OFFICER

DATE

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

REVIEWED BY

VOUCHER NO. 7-12

DESCRIPTION-ALL OTHER ACCOUNTS 13-33

STATION CODE

DESCRIPTION-ADVANCE ACCOUNTS

PUR. ORDER NO. PROP. NG. DIV. PROJECT NO.

DATE

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TOTALS

148-9

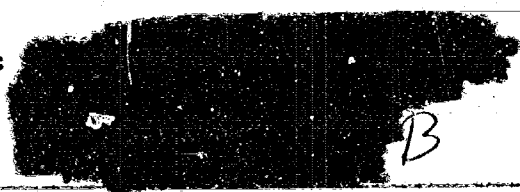


C

CONSULTANT
PHARMACOLOGY AND TOXICOLOGY

11 January 1964

To:



B

For services rendered, January 1964

\$1250.00

I certify that services or materials have been satisfactorily received and the expenditures were incurred on official business.



A

Date: 19 January 1964

141-10

Receipt is hereby acknowledged of Treasurer's
Check No. Y 400369 dated December 31, 1963
drawn on the [REDACTED] E
payable to Dr. [REDACTED] C
the amount of \$750.00.

NAME

[REDACTED]

Date

8 January 1964

124-10

[Redacted]
[Redacted] C
[Redacted]

Consultant
Pharmacology and Toxicology

14 December 1963

To:

[Redacted] B

For services rendered, December 1963

\$750.00

Rec'd Check. 8 Jan 1964

C [Redacted]

C [Redacted]

I certify that services of [Redacted] have been
satisfactorily received and the expenditures
were incurred on official business.

A

[Redacted]

Date: 15 December 1963

148-10

[Redacted]
[Redacted]
[Redacted] C

Consultant
Pharmacology and Toxicology

14 December 1963

To [Redacted] B

For services rendered, December 1963

\$750.00

I warrant that amounts hereon shown were
satisfactorily received and the expenditures
were incurred on official business.

[Redacted] C

[Redacted]

A Date: 16 Dec, 1963

148-11

Receipt is hereby acknowledged of Treasurer's Check
No. 0121056, dated 6 December 1963, drawn on the
payable to Dr. [REDACTED],
\$500.00 in the amount of

C
NAME [REDACTED]

Date 13 Dec. 1963

140-11

[Redacted]

[Redacted]

[Redacted]

Consultant
Pharmacology and Toxicology

30 November 1963

To:

B

[Redacted]

For services rendered, November 1963

\$500.00

I certify that services or materials have been
satisfactorily received and the expenditures
were incurred on [Redacted]

A [Redacted]

Date:

[Redacted]

Payment received, 13 Dec. 1963

C [Redacted]

(When Filled In)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL SERVICES

NAME OF CLAIMANT: [REDACTED] DATE: 1/12/63

CHARGE TO ALLOTMENT OR PROJECT: 425-1000-000

VOUCHER NO. (Finance use, only)

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

425-1000-000 FOR INVOICE # 1 FOR PROFESSIONAL SERVICES RENDERED, WALTER SUBMITTED TO THE [REDACTED] IV-D of the [REDACTED] AREA. I CERTIFY that to the best of my knowledge and belief the amount shown has been disbursed for [REDACTED] AUTHORIZED SERVICES, and services of materials have been received. The amount shown which this document is based on is maintained in the files of [REDACTED] SOCIAL SECURITY RECORDS, and will be made available to the certifying officer at his request. 500.00

Paid in cash to [REDACTED] on 1/12/63

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT. THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE: PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

OBLIGATION REFERENCE NO.	CHARGE ALLOTMENT NO.	DATE	SIGNATURE OF APPROVING OFFICER	DATE	SIGNATURE OF PAYEE
425-1000-000	425-1000-000	1/12/63	[REDACTED]	[REDACTED]	[REDACTED]
DATE	SIGNATURE OF AUTHORIZING OFFICER	CERTIFIED FOR PAYMENT OR CREDIT	SIGNATURE OF CERTIFYING OFFICER	DATE	SIGNATURE OF RECIPIENT

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

PREPARED BY: [REDACTED]

REVIEWED BY: [REDACTED]

VOUCHER NO. 7-12

DESCRIPTION-ADVANCE ACCOUNTS 13-27	34-39 STATION CODE		40-42 EXPEND FUNDS CODE	43	44-46 PAY PER. LIQ. CODE	47-52 OBLIG. REF. NO. REV. ACCY. ASSUMPTION EMP. NO.	53	54-57 GENERAL LEDGER ACCOUNT NO.	58-67 ALLOT. ACCT. NO.	68-70 PAYE DATE		71-80 AMOUNT
	PUR. ORDER NO.	PROP. NO.								PROJECT NO.	DEBIT	
											TOTALS	

148-12

Date: 24 October 1963

MEMORANDUM FOR

SUBJECT : MRULTRA, Subproject No. 148

Under the authority granted in the memorandum dated 13 April 1963, from the DCI to the DD/A, and the extension of this authority in subsequent memoranda, Subproject 148 has been approved, and \$5,000.00 of the over-all Project MRULTRA funds have been obligated to cover the subproject's expenses and should be charged to cost center 4125-1390-3902

[REDACTED]

MANAGER

Com:

[REDACTED]

Asst. Chief

28 OCT 1963

A

Concur:

A

[REDACTED]

APPROVED FOR OBLIGATION OF FUNDS

[REDACTED]

I CERTIFY THAT FUNDS ARE AVAILABLE

OBLIGATION REFERENCE No.

299

CHARGE TO A/C

[REDACTED]

Date:

11/19/63

Special Agent

Group 7

BB

GROUP 7
Excluded from automatic downgrading and declassification

[REDACTED] MKULTRA

WHR

DRAFT

24 October 1963

MEMORANDUM FOR : THE RECORD

SUBJECT : MKULTRA, Subproject 148

1. The purpose of this subproject is to provide a mechanism to utilize the professional services of Dr. [REDACTED]

2. The services fall into the following categories, special consultations, lectures, briefings, participation in planning sessions, participation in and reporting on special meetings and conferences and provision of special information reflecting progress of research and development programs in laboratories known to be conducting work of interest to [REDACTED]

3. Dr. [REDACTED] will, utilizing his position as chairman of the Department of Pharmacology [REDACTED] [REDACTED] consultantships with drug companies and his direct entre into many U.S. and foreign academic laboratories, obtain and provide the very latest information and findings in the field of pharmacology which may be of interest and value to the [REDACTED] program.

4. As a recognized authority in the fields of toxicology and pharmacology, Dr. [REDACTED] is personally acquainted with leaders in the institutional and semi-industrial research and development

[REDACTED] MKULTRA

TOP SECRET
MKULTRA

148-12

- 2 -

laboratories and professional societies and can provide invaluable assistance and information unavailable thru normal channels.

5. The estimated cost of this program for one year is \$5,000.00. Charges should be made against Allotment Number 4125-1390-3902. *C*

6. Payments to Dr. [REDACTED] will be on a reimbursable basis for professional services rendered.

7. Dr. [REDACTED] possesses an Agency TOP SECRET approval. *C*

[REDACTED]

A

G

Distribution:
Original only

TOP SECRET
MKULTRA

148-12

Date 24 October 1963

Branch [REDACTED] Category BEHAVIORAL ACTIVITIES SUPPORT
Advanced Research (Vic)

Project Title N.A. Item Classification N.A.

Project Crypto MKULTRA Crypto Classification Unclassified

Branch Project No. N.A. Project Engineer [REDACTED]

Contractor [REDACTED]

Contract No. MKULTRA 148 Task No. N.A.

Type of Contract MKULTRA Date Initiated 1 November 1963

Cost \$5,000.00 FY 64 Completion Date October 31, 1964

Purpose: To provide mechanisms for professional services, physiological, pharmacological and toxicological information on new materials and drugs currently in the research and development stage in certain institutional and pharmaceutical laboratories. This activity will support TSD/BB activities concerned with influencing animal and human behavior.

Status: Being initiated.

Requirement: Internally generated in TSD. Repeated requests from several DD/P elements including [REDACTED] for support requires [REDACTED] be in the position to maintain immediate response capability.

[REDACTED]

(When Filled In)

VOUCHER NO. (Finance Use Only)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

NAME OF CLAIMANT
MULJIRA Subproject #140

522235 NOV 264

AMOUNT

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

\$500.00

Payment to Dr. [REDACTED] for Invoice No. 9, professional services rendered MULJIRA Subproject No. 120, per para. IV-D of MULJIRA Fiscal Annex. I certify that, to the best of my knowledge and belief, the amount shown has been disbursed for Agency-authorized activities and services or materials have been received. The document upon which this statement is based is maintained in the files of ISD for security reasons and will be made available to the certifying officer at his request.

Please forward check to [REDACTED] through [REDACTED]

I CERTIFY THAT THE 0 SUBSEMENTS ITEMIZED ABOVE WERE NECESSARILY MADE BY ME IN THE CONDUCT OF OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE, THAT I HAVE NOT SEEN, NOR WILL I BE, REIMBURSED THEREFOR FROM ANY OTHER SOURCE, AND THAT THIS CLAIM AND ATTACHMENTS ARE TRUE AND CORRECT.

I authorize my agent, whose signature appears below, to receive currency amounting to the receipt of such funds and my responsibility therefor, when paid to my agent.

DATE 13 Oct 64
SIGNATURE OF PAYEE [REDACTED]
DATE [REDACTED]
SIGNATURE OF AGENT [REDACTED]

APPROVED
SIGNATURE OF APPROVING OFFICER
SIDNEY GOTTLIEB, DC/ISD

RECEIPT FOR FUNDS RECEIVED

PAYMENT RECEIVED IN THE AMOUNT OF \$

299 4123-1300-3902

AUTHORIZED SIGNATURE

CERTIFIED FOR PAYMENT OR CREDIT

DATE 10-19-64

SIGNATURE OF [] PAYEE [] AGENT

SPACE BELOW FOR EXCLUSIVE USE OF CONFIDENTIAL FUNDS DIVISION

VOUCHER NO. 7-12

REVIEWED BY

PREPARED BY [REDACTED]

34-39 STATION CODE	40-42 EXPEND CODE	43 FUNDS	45-46 PAY PER. LIO. CODE	47-52 OBLIG. REF. NO. ADVANCE ACCOUNT NO. EMP. NO.	53 CA YR ACCOUNT NO.	54-57 GENERAL LEDGER ACCOUNT NO.	58-59 ALLOT. OR COST ACCT. NO.	60-70 DUE DATE		71-80 AMOUNT	
								DATE	CLASS		
				299		6010	25-1390	9902	790	500.00	
										500.00	
										TOTALS	500.00

148 13

(When Filled In)

VOUCHER NO. (Finance use only)

506736 AUG 12 64

NAME OF CLAIMANT
MILITARY SUB 6148

CHARGE TO ALLOTMENT OR PROJECT
5128-037

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

AMOUNT

Payment to Dr. [REDACTED] for Invoice No. 8, professional services rendered MKULTRA Subproject No. M9, per para. IV-D of MKULTRA Fiscal Annex. I certify that to the best of my knowledge and belief, the amount shown has been disbursed for Agency-authorized activities and services or materials have been received. The document upon which this statement is based is maintained in the files of ISD for security reasons and will be made available to the certifying officer at his request.

\$500.00

Please forward check to [REDACTED] G. [REDACTED] G. [REDACTED]

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT, THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

I CERTIFY FUNDS ARE AVAILABLE

OBLIGATION REFERENCE NO. 299	CHARGE ALLOTMENT NO. 4125-1390-3902	DATE 31 Jul 1964	SIGNATURE OF APPROVING OFFICER SIDNEY COITTELD, DC/TS	DATE 31 Jul 64	SIGNATURE OF PAYEE A
SIGNATURE OF AUTHORIZING OFFICER	CERTIFIED FOR PAYMENT OR CREDIT	SIGNATURE OF CERTIFYING OFFICER	PAYMENT RECEIVED IN THE AMOUNT OF \$	DATE	SIGNATURE OF RECIPIENT

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

REVIEWED BY

VOUCHER NO. 7-12

DESCRIPTION-ADVANCE ACCOUNTS	PUR. ORDER NO.	34-39 STATION CODE	40-42 EXPEND. CODE	43 FUNDS	45-46 PER. LIQ. CODE	47-52 OBL. REF. NO.	54-57 GENERAL LEDGER ACCOUNT NO.	58-67 ALLOT. OR COST ACCT. NO.	68-70 DUE DATE	71-80 AMOUNT
13-27							1010	25-1390 2902	170	500.00
TOTALS										500.00

(When Applicable)

F-16

VOUCHER NO. (Finance use only)

NAME OF CLAIMANT
LEONARD SUBJECT #162
CHARGE TO ALLOTMENT OR PROJECT
4125-1390-3003

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES-OTHER THAN PERSONAL

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

AMOUNT

[REDACTED] for Invoice # for professional services rendered KATHLEEN LYNN TO Dr. [REDACTED] for professional services rendered KATHLEEN SUBJECT 146, per para. 17-D of the LEONARD Subject Annex. I certify that to the best of my knowledge and belief the amount shown has been disbursed for agency-authorized activities, and services or materials have been received. The documents upon which this statement is based are maintained in the files of TAD for security reasons and will be made available to the certifying officer at his request. \$500.00

PHONE FORWARDED CHECK NO LATER THAN 15 MAY 1964.

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT, THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

I CERTIFY FUNDS ARE AVAILABLE

SIGNATURE OF PAYEE

OBLIGATION REFERENCE NO. CHARGE ALLOTMENT NO.
299 4125-1390-3003

DATE 26 MAY 64
SIGNATURE OF APPROVING OFFICER
HAROLD GORTLAND, DC/TSD

PAYMENT RECEIVED IN THE AMOUNT OF \$
DATE 26 MAY 64
SIGNATURE OF PAYEE

SIGNATURE OF AUTHORIZING OFFICER

CERTIFIED FOR PAYMENT OR CREDIT

SIGNATURE OF RECIPIENT

34-39 STATION CODE	40-42 EXPEND CODE	43 FUNDS	45-46 PAY PER. LIG. CODE	47-52 DEL. REF. NO. AVAILABLE TO ACCOUNTS	53 CA YR	54-57 GENERAL ACCOUNT NO. LEUSCHEN	58-67 ALLOT. ACCT. NO.	68-70 DUE DATE	71-80 AMOUNT	
										60-62 PUR. ORDER NO. PROJ. NO. DIV.
				299		6010	25-1390	2902	700	500.00
TOTALS										

13 148

148 - 13

(When Filled In)

No.

299

Cost Account

h125-1390-3902

Object Class

Date	Remarks and References	Obligations Incurred	Obligations Liquidated	Unliquidated Balance
18 NOV 1963	NEULTRA Sub Proj 148 10/21/63	5000.00		5000.00
14 MAR 1964	Invoice 1		500.00	
14 MAR 1964	" 2		750.00	
14 MAR 1964	" 3		1250.00	
14 MAR 1964	" 4		250.00	2250.00

(When Filled In)

Date: 24 October 1953

MEMORANDUM FOR : C/TSD/TASS
SUBJECT : NEUTRA, Subproject No. 148

Under the authority granted in the memorandum dated 13 April 1953, from the DCI to the DD/A, and the extension of this authority in subsequent memoranda, Subproject 148 has been approved, and \$5,000.00 of the over-all Project NEUTRA funds have been obligated to cover the subproject's expenses and should be charged to cost center 4125-1390-3302

A [Redacted]

PROGRAM MANAGER

Concur:

Asst. Chief, TSD for DEE

Concur:

APPROVED FOR OBLIGATION OF FUNDS:

Chief, DD/TSD

Date:

Distribution:
Group 1 - Assistant
Group 2 - BB

Category VIIc

I CERTIFY THAT FUNDS ARE AVAILABLE
OBLIGATION NUMBER: 299
CHARGE TO ACCOUNT NO. 4

AUTHORIZING OFFICER

GROUP 1

Excluded from automatic downgrading and declassification

3 AUG 1964

VOUCHER NO. (Finance use only)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

AMOUNT

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

Payment on invoice No. 9, professional services rendered MULTITRA Subproject No. 33, paragraph 14-1 of MULTITRA Request Annex. I certify that to the best of my knowledge and belief, the amount shown has been disbursed for Agency-authorized activities and services of materials have been received. The documents upon which this statement is based is maintained in the file of the Security Service and will be made available to the certifying officer at his request. Please forward check to [redacted] through [redacted]

31 Jul 64

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT. THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

I CERTIFY FUNDS ARE AVAILABLE

CHARGE ALLOTMENT NO. 4125-1390-3902

DATE 31 Jul 1964

SIGNATURE OF AUTHORIZING OFFICER [redacted]

SIGNATURE OF APPROVING OFFICER [redacted]

DATE 31 Jul 64

SIGNATURE OF PAYEE [redacted]

DATE 31 Jul 64

PAYMENT RECEIVED IN THE AMOUNT OF \$

DATE

SIGNATURE OF RECIPIENT

VOUCHER NO. 7-12

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

REVIEWED BY

DESCRIPTION-ALL OTHER ACCOUNTS 13-33

DESCRIPTION-ADVANCE ACCOUNTS 1A-2Y

Table with columns: 34-39 STOCKS, 40-42 EXPEND CODE, 43 FUNDS, 45-46 PAY LIO, 47-52 OBLIG REF, 53 ADVANCE CA, 54-57 GENERAL LEDGER, 58-59 ALLOT OR COST ACCT, 60-67 DUE DATE, 68-70 AMOUNT, 71-80 DEBIT CREDIT

TOTALS

FORM 264 USE PREVIOUS EDITIONS.

(When filled in)
 VOUCHER NO. (Finance use only)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

NAME OF CLAIMANT
MARTIN SUBJECT #148

CHARGE TO ALLOTMENT OR PROJECT
4125-1000-3002

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE • ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

AMOUNT

6 for Invoice 6 for professional services rendered MILWAUKEE PROJECT 148, per para. 17-B of the MILWAUKEE fiscal Annex. I certify that to the best of my knowledge and belief the amount shown has been disbursed for Agency-authorized activities, and services or materials have been received. The documents upon which this statement is based are maintained in the files of TFD for security reasons and will be made available to the certifying officer at his request.

\$500.00

Please forward check no later than 15 May 1964.

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT, THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

I CERTIFY FUNDS ARE AVAILABLE

OBLIGATION REFERENCE NO. <u>4</u>	CHARGE ALLOTMENT NO. <u>4125-1000-3002</u>	DATE <u>24 Apr 64</u>	SIGNATURE OF APPROVING OFFICER <u>[Redacted]</u>	SIGNATURE OF PAYEE <u>[Redacted]</u>
DATE <u>27 MAY 1964</u>	SIGNATURE OF AUTHORIZING OFFICER <u>[Redacted]</u>	CERTIFIED FOR PAYMENT OR CREDIT	PAYMENT RECEIVED IN THE AMOUNT OF \$	
		DATE <u>[Redacted]</u>	SIGNATURE OF CERTIFYING OFFICER <u>[Redacted]</u>	SIGNATURE OF RECIPIENT <u>[Redacted]</u>

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

REVIEWED BY

VOUCHER NO. 7-12

DESCRIPTION-ADVANCE ACCOUNTS	13-27	34-39	40-42	43	45-46	47-52	53	54-57	58-67	68-70	71-80
PUR. ORDER NO.	PROJECT NO.	EXPEN. CODE	FUNDS CODE	LIG. CODE	PAY. LIG. CODE	OBLIG. REF. NO.	ADVANCE ACCOUNTS YR	GENERAL LEDGER ACCOUNT NO.	ALLOT. ACCT. NO.	DUPLICATE DATE	AMOUNT
TOTALS											

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

VOUCHER NO. (Finance use only)

NAME OF CLAIMANT

MADEIRA AND # 100

CHARGE TO ALLOTMENT OR PROJECT

415-1000-0000

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

AMOUNT

Payment to Dr. [REDACTED] for invoice # 5 for professional services rendered pursuant to project 100 per paragraph IV-D of the Mutual Personal Annex. I certify that to the best of my knowledge and belief the amount shown has been disbursed for agency authorized activities, and services or materials have been received. The documents upon which this statement is based are maintained in the files of IAD for security reasons, and will be made available to the certifying officer at his request.

250.00

PLEASE FORWARD CHECK TO [REDACTED] NO LATER THAN 15 APRIL 1964

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT. THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

I CERTIFY FUNDS ARE AVAILABLE

APPROVED

SIGNATURE OF APPROVING OFFICER

DATE

SIGNATURE OF PAYEE

OBLIGATION REFERENCE NO. CHARGE ALLOTMENT NO.

299 415-1000-0000

SIGNATURE OF AUTHORIZING OFFICER

DATE

CERTIFIED FOR PAYMENT OR CREDIT

DATE

PAYMENT RECEIVED IN THE AMOUNT OF \$ A

DATE

2 APR 1964

SIGNATURE OF CERTIFYING OFFICER

DATE

SIGNATURE OF RECIPIENT

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

PREPARED BY

REVIEWED BY

VOUCHER NO. 7-12

DESCRIPTION - ALL OTHER ACCOUNTS 13-33

DESCRIPTION - ADVANCE ACCOUNTS 13-27

POP. ORDER NO. 13-33

PROJECT NO.

STATION CODE

40-42 EXPEND. CODE

45-46 PAY. LIQ. CODE

47-52 REF. NO.

54-57 GENERAL LEDGER ACCOUNT NO.

58-67 ALLOT. OR COST ACCT. NO.

68-70 DUE DATE

71-80 AMOUNT

DEBIT

CREDIT

TOTALS

(When Filled In)

VOUCHER NO. (Finance use only)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

NAME OF CLAIMANT

CHARGE TO ALLOTMENT OR PROJECT

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

FOR INVOICE # 3 FOR PROFESSIONAL SERVICES RENDERED, SUBJECT TO PARAGRAPH IV-D OF THE MILITARY DISCIPLINARY ACT. I CERTIFY THAT THE SUBJECT HAS BEEN DISBURSED FOR THE AMOUNT SHOWN HAS BEEN DISBURSED FOR THE AGENCY'S ACTIVITIES, AND SERVICES OF MATERIALS HAVE BEEN RECEIVED. THE AMOUNT SHOWN HAS BEEN MAINTAINED IN THE FILES OF THE CERTIFYING OFFICER AT HIS RESIDENCE, AND WILL BE MADE AVAILABLE TO THE CERTIFYING OFFICER AT HIS RESIDENCE.

THE AMOUNT SHOWN IS THE AMOUNT OF THE INVOICE DATED 2 JANUARY 1968

1,250.00

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT, THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

SIGNATURE OF PAYEE

DATE

APPROVED SIGNATURE OF APPROVING OFFICER

DATE

OBLIGATION REFERENCE NO. CHARGE ALLOTMENT NO.

SIGNATURE OF PAYEE

DATE

APPROVED SIGNATURE OF APPROVING OFFICER

DATE

OBLIGATION REFERENCE NO. CHARGE ALLOTMENT NO.

PAYMENT RECEIVED IN THE AMOUNT OF \$

DATE

CERTIFIED FOR PAYMENT OR CREDIT SIGNATURE OF CERTIFYING OFFICER

DATE

SIGNATURE OF AUTHORIZING OFFICER

SIGNATURE OF PAYEE

DATE

CERTIFIED FOR PAYMENT OR CREDIT SIGNATURE OF CERTIFYING OFFICER

DATE

SIGNATURE OF AUTHORIZING OFFICER

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION

REVIEWED BY

VOUCHER NO. 7-12

DESCRIPTION-ADVANCE ACCOUNTS 13-27	PUR. ORDER NO. 13-27	STATION CODE 4-39	EXPEND CODE 40-42	FUNDS CODE 43	PAY PER. LIQ. CODE 45-46	OBL. REF. NO. 47-52	GENERAL LEDGER ACCOUNT NO. 54-57	ALLOT. ACCT. NO. 58-67	DUE DATE 68-70	71-80 AMOUNT	DEBIT	CREDIT
...
...
...
...
TOTALS										2,500.00	2,500.00	

X 2802

(When Filled In)

REIMBURSEMENT VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL SERVICES

NAME OF CLAIMANT: [REDACTED]

CHARGE TO ALLOTMENT OR PROJECT: [REDACTED]

VOUCHER NO. (Finance use only)

REIMBURSEMENT OR PAYMENT IS CLAIMED FOR MATERIALS, SERVICES, OR OTHER EXPENDITURES ITEMIZED BELOW WHICH ARE PROPERLY CHARGEABLE TO THE ALLOTMENT OR PROJECT DESIGNATED.

DESCRIPTION OF EXPENDITURE - ATTACH RECEIPTS AND OTHER SUPPORTING DOCUMENTS

AMOUNT

Payment to Dr. [REDACTED] for invoice # 2 for professional services rendered, [REDACTED] Subproject 100 per paragraph IV-D of the [REDACTED] Fiscal Annex. I certify that to the best of my knowledge and belief the amount shown has been disbursed for agency authorized activities, and services or materials have been received. The documents upon which this statement is based are maintained in the files of [REDACTED] for security reasons, and will be made available to the certifying officer at his request. \$750.00

Please forward check to [REDACTED] thru [REDACTED] no later than 31 Dec. 1963

I CERTIFY THAT THIS VOUCHER AND ANY ATTACHMENTS ARE CORRECT, THE EXPENDITURES WERE INCURRED ON OFFICIAL BUSINESS OF A CONFIDENTIAL, EXTRAORDINARY, OR EMERGENCY NATURE; PAYMENT OR CREDIT HAS NOT BEEN RECEIVED, AND I SHALL NOT BE REIMBURSED FROM ANY OTHER SOURCE.

APPROVED

DATE: 12/23/63 SIGNATURE OF PAYEE: [REDACTED]

SIGNATURE OF APPROVING OFFICER: [REDACTED]

CERTIFIED FOR PAYMENT OR CREDIT: [REDACTED]

SIGNATURE OF CERTIFYING OFFICER: [REDACTED]

OBLIGATION REFERENCE NO. CHARGE ALLOTMENT NO. DATE

299 4125-1000-0002 DATE: 12/30/63

SIGNATURE OF AUTHORIZING OFFICER: [REDACTED]

SPACE BELOW FOR EXCLUSIVE USE OF FINANCE DIVISION										
DESCRIPTION-ADVANCE ACCOUNTS	7A	78	40-42	43	45-46	47-52	53	54-57	58-67	68-70
13-27	PUR. ORDER NO.	PROP. NO.	EXPEND. CODE	FUMS	LIO. CODE	REPLING. ACCT.	CA	GENERAL LEDGER ACCOUNT NO.	ALLOT. OR COST ACCT. NO.	DUE DATE
							YR			71-80
										AMOUNT
								4400509		750.00
										TOTALS

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